

For

Washington  
State

Liquor Control  
Board

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June 17

2003

**Evaluation of the Tacoma,  
Washington, Alcohol Impact  
Area (AIA)**

**Report**

**Of**

**Research Activities Undertaken in Support  
of an Evaluation of the Tacoma,  
Washington, Alcohol Impact Area (AIA)**

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**DEFENDANT'S  
EXHIBIT**

CASE  
NO. C04-0360P

EXHIBIT  
NO. 551

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## **EXECUTIVE SUMMARY**

The Washington State University Social and Economic Sciences Research Center conducted a study of the Alcohol Impact Area (AIA) policy in effect in the city of Tacoma, Washington. Different scientific approaches were used to determine if there have been any changes in the problem of chronic public inebriation as a result of the restrictions on alcohol sales imposed by the Washington State Liquor Control Board (WSLCB).

The study results suggest that the AIA restrictions in effect over the past year have been effective at addressing the problem of chronic public inebriation. Although it is not possible to conclude that all the changes found are due solely to the AIA policy itself, it is probable that the AIA restrictions on alcohol sales are one aspect of an entire community wide effort to deal with chronic public inebriation.

### **Background**

The AIA rules, Washington Administrative Code (WAC) 314-14-210 through WAC 314-12-225, establish a framework under which the WSLCB, in partnership with local government and community organizations, can act to mitigate the negative impacts on a community that result from the presence of chronic public inebriation. Under these rules, chronic public inebriation exists when the effects of the public consumption of alcohol and/or public intoxication occur in concentrations that endanger the welfare, health, peace, or safety of a community.

In December 2001, the WSLCB designated as an Alcohol Impact Area the urban core of the city of Tacoma, approximately six square miles.

As a result of the AIA designation, the WSLCB banned the sale of some 30 brands of high-alcohol content, low price beer and wine products by liquor retailers located inside the AIA. This restriction has been in effect since March 1, 2002.

### **Study Scope**

AIA rules provide that one year after the WSLCB recognizes the first AIA, a study of the effectiveness of the AIA rules would be conducted. The study's scope and methods were primarily intended to:

- Determine whether there have been any significant changes in the negative impacts of chronic public inebriation in the designated alcohol impact area.
- Gather information and data on retailers' marketing practices and buying habits of chronic public inebriates that will help the community and the WSLCB evaluate which restrictions might be effective in addressing the problem of chronic public inebriation.

The study used two basic research designs commonly used to evaluate social programs. Consistent with good practice in evaluation research, the evaluation used multiple methods to obtain information relevant to the assessment of the effectiveness of the AIA restrictions. These methods were:

- A telephone survey of over 200 randomly selected household residents from the city of Tacoma.

- A mail survey of 56 retailers that have liquor licenses to sell alcohol products "to go"; 52 retailers were located within the AIA boundaries and 4 retailers were within 5 blocks of the AIA boundaries. From these, 19 retailers completed and returned the survey for a 34% response rate.
- A web survey of people who work in the downtown urban core area of Tacoma. A total of 165 people responded.
- A telephone survey of beer and wine distributors in the Tacoma AIA.
- Focus groups of the following, to obtain qualitative information about the effects of the AIA restrictions:
  - Community volunteers
  - Community residents
  - Retailers with liquor licenses in the AIA and located within 5 blocks of the AIA boundaries
  - Chronic Public Inebriates at the Tacoma Rescue Mission
  - Chronic Public Inebriates at the Detox facility
- Collection and analysis of statistical data from the city of Tacoma prior to and after the AIA implementation, on the following:
  - Monthly number of police service calls for "drunk in public," "liquor in park," and other situations.
  - Monthly number of admissions to the Tacoma Detox facility
  - Number of emergency medical service calls in the AIA, and non-AIA parts of Tacoma
- A comparison of changes in gross sales before and after the AIA implementation for retailers with liquor licenses to sell alcohol "to go."

**Key Findings.** The study results suggest that the AIA restrictions have been effective in addressing the problem of chronic public inebriation in the AIA. The following results are strong indicators of improvements in the welfare of the community:

- **35% Decrease in Emergency Medical Service (EMS) incidents.** In the 13 months prior to the AIA implementation, there were 1036 alcohol-related EMS incidents with the AIA and 667 such incidents in the 13 months after the AIA policy began. (During the AIA period, there was a 15% increase in EMS incidents in parts of the city outside of the AIA).
- **21% Decrease in Detox Admissions.** Detox admissions averaged 132 cases each month from January 2000 through January 2001. During the period from March 2002 through March 2003, detox admissions averaged 104 per month.

- **61% decrease in "Liquor in the Park" police service calls.** In the 13 months prior to the AIA, there were 54 police service calls for "liquor in the park" within the AIA; this dropped to 21 calls in the 13-month period after the AIA policy began. (A 19% decrease occurred for calls in parts of the city outside the AIA).
- **Fewer Chronic Public Inebriates and problems**
  - 22% of people living in the AIA, and 26% of the retailers, said that the number of persons drinking alcohol in public in their neighborhood has decreased over the past two years. In comparison, fewer than 10% of people living outside the AIA or on the boundaries said that the number of persons drinking alcohol in public has decreased.
  - 25% of people living in the AIA, and 21% of the retailers, said that the problem of chronic public inebriation has decreased compared with two years ago. In comparison, only 7% of people living outside the AIA or on the boundaries said that the problem has decreased.
  - 19% of people living in the AIA, said that the number of persons urinating or defecating in public places in their neighborhood has decreased compared with two years ago. In comparison, only 8% of people living outside the AIA or on the boundaries, said they saw a decrease.
  - Community volunteers reported less panhandling and less evidence of chronic public inebriates in the AIA area.
- **Less trash and litter from chronic public inebriates.**
  - Community volunteers involved in neighborhood litter patrols reported a significant decrease in the number of bottles, cans and other street trash.
  - 31% of people living in the AIA, and 31% of retailers, said that the amount of trash and litter due to chronic inebriation in their neighborhood has decreased over the past two years. In comparison, only 10% of people living outside the AIA or on the boundaries, said the amount of trash or litter due to chronic public inebriation in their neighborhood has decreased.
- **Community residents feel safer and better about their neighborhood.**
  - Over 25% of people living within the AIA said, compared with two years ago, they feel safer in their neighborhood now.
  - Almost 45% of people living within the AIA said that over the past two years their neighborhood has changed for the better, and only 8% said for the worse.
  - Community volunteers in the focus group reported that they feel better about their neighborhood and felt that the AIA policy has significantly reduced the problem of chronic public inebriation in their community.

## **Study Conclusion**

The evaluation results suggest that the AIA rules have been effective at achieving most of the goals of dealing with the problem of chronic public inebriation. Some of the results are quite strong, especially the reductions in police service calls within the AIA, the decreases in alcohol related emergency medical services incidents and detoxification facility admissions, and the public perceptions of changes in problems associated with chronic public inebriation.

While the evaluation finds several indicators of positive change in the Tacoma AIA, it is not possible to conclude that all the changes are due solely to the AIA itself. It is possible that some of these changes may have occurred even without the AIA. There were a number of other things happening to deal with the problem of chronic public inebriation, including volunteer efforts to clean up street litter, increased police participation in dealing with the CHRONIC PUBLIC INEBRIATE problem, downtown urban revitalization efforts, and the provision of more services with the opening of the new Tacoma Rescue Mission.

In summary, it is probable that the AIA restrictions are just one aspect of an entire community wide effort to deal with chronic public inebriation. Putting the AIA restrictions in place strengthened the community wide efforts and gave others more motivation to deal with the problem of chronic public inebriation.

**Purpose****Overview**

The purpose of the Alcohol Impact Area (AIA) rules is to establish a framework under which the Board, in partnership with local government and community organizations, can act to mitigate negative impacts on a community's welfare, health, peace, or safety that result from the presence of chronic public inebriation.

**Goal**

The overall goal of the AIA is to deal with the negative effects and problems associated with Chronic Public Inebriation (CPI). For the purpose of these rules, chronic public inebriation exists when the effects of the public consumption of alcohol and/or public intoxication occur in concentrations that endanger the welfare, health, peace, or safety of a neighborhood or community.

**Strategies**

- Designate an Alcohol Impact Area (AIA) in the urban core part of the city of Tacoma.
- Restrict the sales of high alcohol content beer and wine for off-premises (to go) sales.
- Involve community residents, social service agencies, police, and other public services in helping to mitigate the negative effects of chronic public inebriation.

**Target Group**

Chronic public inebriates, defined as persons with a severe alcohol problem who are frequently drunk in public.

**Causal Statement**

If the alcohol products desired by chronic public inebriates are not available to them, then they will do one or more of the following:

- Not buy any alcohol products
- Buy different alcohol products
- Go outside the area to buy desired products
- Leave the area altogether
- Seek treatment
- Take other possible actions

**Outcomes**

A number of outcomes in the AIA are possible including:

- Fewer chronic public inebriates and problems
- Reduced intoxication levels among chronic public inebriates
- Less trash and litter from chronic public inebriates
- Fewer incidents of public drunkenness
- Fewer alcohol related problems
- Community residents who feel safer and happier
- Other unanticipated outcomes

## **Background and Purpose**

### **AIA Alcohol Impact Area Urban core area of the City of Tacoma**

***To evaluate the effects of the designation of an Alcohol Impact Area in the city of Tacoma, Washington.***

## **Background**

Citizen complaints about the problem of chronic public inebriation in the city of Tacoma resulted in a city ordinance recommending the establishment of an alcohol impact area in the urban core part of the city of Tacoma.

Under Washington Administrative Code (WAC) 314-14-20 through WAC 314-12-225, the Washington Liquor Control Board can act to mitigate the negative impacts on a community that result from the presence of chronic public inebriation. In October 2001 the City of Tacoma requested that an Alcohol Impact Area (AIA) be designated (described in Ordinance No. 26869) and that alcohol products linked to the problems associated with chronic public inebriation be banned from sale within the AIA area.

The Alcohol Impact Area includes the urban core area of the city:

- Bounded on the north by Schuster Parkway and North 30<sup>th</sup> Street
- Bounded on the west by Alder Street
- Bounded on the south by State Route 16 and Interstate 5
- Bounded on the east by Port of Tacoma Road, State Route 509, and East "D" Street, to the end of the City of Tacoma limits.

This is approximately 6 square miles.

Effective March 1, 2002 retail establishments with liquor licenses in the AIA were barred from selling certain beer and wine products for off-premises sale ("to go"). On January 15, 2003 several additional beer and wine products were added to this list of banned products. See page 56 for the list of products.

## **Purpose**

WAC 314-12-220 provides that a study of the effectiveness of the AIA rules is to be conducted one year after the WSLCB's recognition of the first AIA. The main goals of this evaluation include:

- Determine whether there have been any significant changes in the negative impacts of chronic public inebriation (CPI).
- Gather information and data on retailers' marketing practices and buying habits of chronic public inebriates that will help the community and the WSLCB evaluate which restrictions might be effective in addressing problems of chronic public inebriation.



- Develop standards and guidelines to measure the effectiveness of AIA restrictions.
- Study is not intended to evaluate the effectiveness of any treatment or other social services that chronic public inebriates may have received.

Another main goal of the evaluation of the Tacoma AIA is that this be done objectively and using established evaluation research methods. However, the evaluation had limited choices of research design because it was designed and conducted after the rules had already been implemented.

#### **Justification**

There is substantial justification for the AIA policies in the research literature on risk and protective factors associated with the prevention of drug and alcohol problems. Two researchers at the University of Washington, J. David Hawkins and Rick F. Catalano have conducted research to identify those risk factors that increase the likelihood of substance abuse, and those factors that protect against the likelihood of substance abuse.

Among the community risk factors that they identify as increasing the likelihood of substance use are:

- The availability of drugs and alcohol
- Community laws and norms favorable toward alcohol and drug use
- Low neighborhood attachment and community disorganization

AIA policies that effectively reduce the availability of alcohol to chronic public inebriates are thereby reducing one of the main risk factors of excessive alcohol use.

Additionally, community efforts to deal with the effects of chronic public inebriation are protective factors that reduce the likelihood of alcohol and drug use. In the AIA these community efforts have included such things as voluntary efforts to clean up litter, police patrols that deal with chronic public inebriates using liquor in public places, and retailers voluntarily signing Good Neighbor Agreements to not sell alcohol products to inebriated individuals.

Donald Lachman, a consultant, working with the Substance Abuse Long Term (SALT) Planning Group, in Tacoma and Pierce County, has suggested that "opportunities exist to advance both short and long-term improvements to the systems responding and managing chronic street populations."

## Evaluation Design

Work by SALT and Lachman in Tacoma shows that the chronic street population is diverse, mixed, and growing, with the majority residing within about a 3-mile radius within the city of Tacoma. SALT maintains that "substance abuse is the major destabilizing condition among the chronic street population, which costs Tacoma/Pierce county millions of dollars a year using costly medical, criminal justice and emergency services as a primary response, particularly chronic public inebriates." SALT also notes that "current responses to the chronic street population have been ineffective in significantly changing criminal and uncivil behaviors and conditions that denigrate neighborhood livability."

The AIA restrictions on high alcohol content, low-cost beverages represent an untested, but viable approach to changing environmental conditions that encourage changes in the behavior of chronic public inebriates.

### Evaluation Design

This evaluation uses two basic research designs, commonly used in evaluation research (Mohr, 1995). The first is sometimes known as the "one-shot case study" diagrammed as:

T   Y

Where T = treatment or implementation of the AIA  
Y = measurement of effects

The second design is known as a "before-after" design and is diagrammed as:

Y<sub>1</sub>   T   Y<sub>2</sub>

Where T = treatment or implementation of the AIA  
Y<sub>1</sub> = measurement before AIA  
Y<sub>2</sub> = measurement after AIA

These methods are very commonly used to evaluate social programs. Since it is not possible to use experimental methods with random assignment, commonly used evaluation designs require multiple methods to establish causal links.

The evaluation used multiple methods to obtain information relevant to the issue of assessing the effectiveness of the AIA designation. This is considered good practice in evaluation research (Posavac & Carey, 1997) because of the difficulty of establishing cause and effect in social action research.

## **Study Components**

### **Surveys:**

- **Residents**
- **Retailers**
- **Workers**
- **Beer and Wine Distributors**

For the statistical analysis of data relevant to this evaluation there are three time periods that are important:

Pre-AIA period:  
January 1, 2000 to  
January 31, 2001

Voluntary Compliance:  
February 1, 2001 to  
February 28, 2002

AIA Period: March 1,  
2002 to March 31, 2003

While restricting the sale of alcohol is not a new practice, there has been no research on the effectiveness of this approach to dealing with the problem of chronic public inebriation in a core urban area such as the Tacoma AIA. This evaluation represents one of the first attempts to study the effectiveness of this approach.

The evaluation of the Tacoma AIA involved the following different approaches:

- A telephone survey of over 200 randomly selected household residents from the city of Tacoma.
- A mail survey of 56 retailers, that have a liquor license to sell alcohol products "to go," within the AIA boundaries.
- A web survey of people who work in the downtown urban core area of Tacoma.
- A telephone survey of beer and wine distributors in the Tacoma AIA.
- Focus groups of the following, to obtain qualitative information about the effects of the AIA:
  - Community volunteers
  - Community residents
  - Retailers with liquor licenses within the AIA
  - Chronic Public Inebriates at the Tacoma Rescue Mission
  - Chronic Public Inebriates at the Detox facility
- Collection of data prior to and after the AIA implementation, on the following:
  - Monthly number of police service calls for "drunk in public," "liquor in park," and other situations.
  - Monthly number of admissions to the Tacoma Detox facility
  - Number of emergency medical service calls in the AIA, and non-AIA parts of Tacoma
- A comparison of changes in gross sales before and after the AIA implementation, on the following:
  - Retailers with liquor licenses to sell alcohol "to go"
  - Beer and wine distributors